DC Office of Planning

A Partner in Healthy Living

BY B. MICHELLE HARRIS McQureerir

asoline prices are skyrocketing. Food prices have increased faster than anyone would have thought. With the mortgage crisis, more people than ever are struggling to keep a roof over their heads. Messages about staying healthy are getting buried beneath the worst economic turmoil that the US has experienced in years. We all know of someone who has been forced to make drastic changes in their lives just to make ends meet. In fact, this "someone" could be you.

This month's column shares ways we can collectively and individually make changes in how we travel. This could save us money and improve our health. Harriet Tregoning, director of the DC Office of Planning, invites you to share your concerns and ideas with her.

The Bicycle Lady

Tregoning at times is affectionately referred to as "the bicycle lady." I first met her at the annual conference of Active Living Research, a Robert Wood Johnson Foundation program (EOR May 2008), where she was a keynote speaker. The audience was impressed that she looked fresh and elegant after riding her bicycle to the conference. At my next meeting with Tregoning, my first impression of her was validated: it was a refreshing delight to meet with a policymaker who does not just "talk the talk" but who "walks the walk," or rather, "bikes the bike."

A Matter of Choice

Tregoning strongly believes that people should have a choice in their modes of transportation.

According to Tregoning, "We live in a time when energy prices are volatile," and are on the rise. "We need to provide a buffer from energy prices." She stressed that it is important to give people more transportation options. "For the past 30 years, it was not fashionable to think in terms of a walkable or bikeable trip. Everything was given to the car." She added that little respect was given to the pedestrian or biker.

ity goals. She noted that one must work to build physical activity into one's day. "If we don't build physical activity into our everyday life, it becomes a luxury." She referred to the 10,000 steps-a-day program where the average person can meet their daily physical activity target (Visit www.shapeup. org/shape/steps.php for information on the 10,000 steps program).

Tregoning reported that 60 percent of DC households across all income levels own automobiles. She noted that many households of higher income, often by choice, do not own an automobile. On the other hand, low-income households not only have to choose between heating their homes and buying healthy foods for their families, they also have to make choices between housing and transportation.

Better Health Outcomes

Tregoning stated that one of the objectives of good planning is better health outcomes. This involves access to healthy foods, including nearby supermarkets, farmers markets, community gardens and corner stores that sell healthy foods.

Good city planning also includes access to parks and recreation. Tregoning noted that patterns of physical activity are set early in life. Children 5-17 years old must be the focus of any plan to improve a community's health outcomes; therefore, we should invest in places that provide physical education. She added that city planners must accommodate transit in decisions that involve the environment.



walk and, thus, increase their physical activity. According to Tregoning, walking can be utilitarian, recreational or rambling, strolling, promenading or protest/organizing.

Utilitarian walking is walking to a destination, usually to work or to a store. The purpose of this type of walking is walking as transit (instead of traveling in a car or bus). Recreational walking/ rambling is walking through a park or in a mall. Sites for rambling include Watts Branch Stream area or Fort Dupont Park/Fort Circle Park. Recreational walking/rambling can involve social networks or support groups, such as church or community organizations that sponsor walking groups.

Strolling can be classified as recreation but is often applied to walking as entertainment in and of itself. Strolling may take place after dinner or when window shopping. Strolling must be an interesting walk and may involve retail outlets. Tregoning stated, strolling "is the hallmark of a great city."

Tregoning added that promenading is walking "to see and be seen." She added that promenading is a type of walking that young people love to do. It is part of "street life" or the night scene. Areas such as Georgetown, Adam's Morgan, U Street, and Gallery Place are popular places in DC for promenading.

Protest/organizing walking takes place in DC more than in other cities. It is walking to make a statement. On the National Mall and along Pennsylvania Avenue, we often see civic expression in motion. Tregoning noted that symbolically, one can "walk from Congress to the White House to the Supreme Court." Parading is also walking to make a statement.

Tregoning emphasized that different walking activities need different types of facilities to accommodate them. She noted that some cities are built to accommodate rambling. Examples are cities or towns with trails for exercise. These trails often go nowhere. Tregoning noted that DC is a great place to live and work in terms of the many options residents and visitors have for various types of walking. She added that Washington has a lot to contribute. "It is easy and convenient and fun for people to get around in the city and not have to rely on automobiles."

Public Involvement

Tregoning stated that it is important to have public involvement on transportation issues at both the District level and the federal level. She invites residents of the DC to contact her office for help in navigating through the network of departments and offices to get their voices heard on issues related to public (http://planning.dc.gov/planning or 202-442-7600). "There are avenues to get decision-makers to listen to communities."

One important start to having one's voice heard is to contact one's advisory neighborhood commission (ANC). Alternatively, contact the city agency responsible for the issue you would like addressed—parks, safety, trash, traffic. Tregoning cautioned that it may take as little as four months or up to a year or more to implement changes that involve the Office of Planning. The time factor depends on the scale or size of the project. It may involve several public meetings.

Tregoning noted that her office invites lay people (non-planners) to actively participate in design workshops for various planning projects. Tregoning stated that anyone can make a recommendation for improving one's community. "They just have to care. What would make the community better? What do you want to preserve? What would you like to see your community

Tregoning reminds us that transit must include choices. In addition, planners and health professionals share the important task of showing people what their options are. "Sometimes, we do not consider something an option—we don't know [all of our options]." She noted that non-car options "have become fashionable again."

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Correction: We extend our apologies to Councilmember/Mayor Marion S. Barry and to our readers for the misspelling of Barry's name in last month's column.



Community members needed for a Discussion Group

DC residents are being invited to participate in a focus group so that we can learn more about stroke. The information gathered will be used in research program designed to fight stroke in the community. You don't need direct experience with or knowledge about stroke to participate.

The topics of discussion will include your experience with stroke (if any), your attitudes and beliefs about stroke symptoms and stroke treatment, and your feelings about local emergency services and hospitals.

Benefits

- 1. Opportunity to share your views and knowledge about stroke and its effects on the local community
- 2. \$20 gift certificate for participating in the focus group

All information collected is strictly confidential.

Principal Investigator: Amie Hsia, MD Georgetown University Medical Center TRIUMPH OVER STROKE Program - The ASPIRE Project

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